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| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2009</b><br><i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>   |  | Docket Number (Optional)<br><b>418268867US</b> |
|---|--|--|
| Application Number  | 10/776,489-Conf. #3229                 | Filed<br><b>February 11, 2004</b>              |
| For <b>SYSTEM AND METHODS FOR FACILITATING THIRD-PARTY CALL AND DEVICE CONTROL</b>  |  |  |
| Art Unit  | 2416                                   | Examiner<br><b>A. Lai</b>                      |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  |  |  |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):   |  |  |
|   | Fee                                    | Small Entity Fee                               |
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))   | \$130                                  | \$65   |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))   | \$490                                  | \$245  |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))   | \$1110                                 | \$555  |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))  | \$1730                                 | \$865  |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))  | \$2350                                 | \$1175   |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.<br><input type="checkbox"/> A check in the amount of the fee is enclosed.<br><input checked="" type="checkbox"/> Payment by EFT Account SEA1PIRM has already been authorized.<br><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.<br><input checked="" type="checkbox"/> The Director is hereby authorized to charge any deficiencies or credit any overpayment to<br>Deposit Account Number <u>50-0665</u> . |  |  |
| WARNING: Information on this form may become public. Credit card information should not be included on this form.<br>Provide credit card information and authorization on PTO-2038.   |  |  |
| I am the <input type="checkbox"/> applicant/inventor.   |  |  |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).   |  |  |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>33,273</u>  |  |  |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34.<br>Registration number if acting under 37 CFR 1.34 _____  |  |  |
| <u>Maurice J. Pirio</u><br>Signature  |  | June 17, 2009<br>Date                          |
| Maurice J. Pirio<br>Typed or printed name   |  | (206) 359-8000<br>Telephone Number             |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.   |  |  |
| <input checked="" type="checkbox"/>   | Total of <u>1</u> forms are submitted. |  |